## APPLICATION FOR REGISTRATION OF A FOREIGN LIMITED PARTNERSHIP

(Filing Fee \$100)

\*\*\*This document must be accompanied by written proof of existence from the home state, equivalent of a Certificate of Good Standing.\*\*\*

The undersigned Limited Partnership, for the purpose of registering pursuant to the provisions of Section 10-902 of the Corporations and Associations Article of the Annotated Code of Maryland, to do interstate, intrastate or foreign business as a foreign Limited Partnership in the State of Maryland hereby certifies:

A. That the name of the Limited Partnership is:		
<b>B.</b> If different from above, the name under which the Limited Partnership proposes to register and do business in Maryland is:		
Maryland is:(MUST INCLUDE "LIMITED PARTNERSHIP" or "LP")		
C. The Limited Partnership was formed on:		
<b>D.</b> The Limited Partnership was formed in the State of:		
E. The general character of the business it proposes to transact is as follows:		
<b>F.</b> The name and street address of its resident agent in Maryland is (NO P.O. BOXES):		
T. The hame and street address of its resident agent in Waryland is (NOT.O. DOZLS).		
<b>G.</b> The Limited Partnership agrees that the State Department of Assessments and Taxation is appointed as the resident agent of the Limited Partnership if no resident agent has been appointed under Part F, or if appointed, the resident agent's authority has been revoked, or if the agent cannot be found or served with the exercise of reasonable diligence.		
<b>H.</b> The address of the office required to be maintained in the State or Country of its organization by the laws of that jurisdiction, or if not so required, of the principal office of the Limited Partnership is:		
I. The names and business, residence, or mailing address of each of the general partners are:		

J. The Limited Partnership (check appropriate response):		
(1)    has (2)    (has not) done intrastate, interstate, or foreign business in this State without having registered as a foreign Limited Partnership.		
<b>NOTE:</b> If box (1) in Part J is checked indicating that the foreign business in Maryland before registering; a penalty filing fee.	•	
I, am general partne	r of	
and certify that the foregoing is true to the best of my kno	wledge, information, and belief.	
	(Name of Limited Partnership)	
(Date)	(Signed: General Partner)	
I hereby consent to my designation in this document as re	sident agent for this limited partnership.	
	(Signed: Resident Agent)	

301 West Preston Street, Room 801 – Baltimore, Maryland 21201 Phone: (410) 767-1350 – Fax: (410) 333-7097 – TTY Users call Maryland Relay 1-800-735-2258 Toll Free in MD: 1-888-246-5941 – website: http://www.dat.maryland.gov

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